

troops, though frequent amongst soldiers on the march who were obliged to drink water which had been merely boiled, not sterilized. An outbreak of typhoid, which took place on board the *Friant*, while anchored off Taku, was attributable to the same cause. The Germans had 23,000 men and 135 surgeons, two of whom were University professors sent out for special laboratory work. They suffered a good deal from dysentery, because they only sterilized the drinking water in the hospitals, and not in the camp, where the men had to be content with boiled water. They had neglected to bring with them some of the most valuable drugs for use against dysentery, and when they got them did not know how to use them. Their average of men in hospital was generally from 4 to 5 per cent of the force, whereas the French never reached to more than 2.7 per cent; nevertheless, they were well satisfied with the sanitary condition of their men. The American force was a very small one, but its medical arrangements were excellent, and in spite of the fact that the men drank only boiled water, they enjoyed an excellent average of good health. The British medical service, on the other hand, was out and away the worst of all. Some of the surgeons came from the Indian Medical Service, others from the Royal Army Medical Corps. There was no cohesion or unity of action between these two branches of the medical service; instruments, apparatus, fittings, all seemed to have been supplied from a lumber room of old stock. Every now and again some up-to-date instrument would make its appearance, but such luxuries were uniformly destined for the British soldiers, and not for their Indian confreres. Having made which disparaging remarks, the writer is eloquently silent as to the way in which the British troops of all shades stood the fatigues of their campaign in spite of their old-fashioned appliances. The Italian arrangements were good, those of the Russians excellent. The Russian medical corps came mostly from the Siberian army, and all its appliances and arrangements were excellently adapted to the needs of the Russian soldiers, who are not quite of the same type as the other European soldiers. The Japanese had some fifty surgeons, and six field hospitals, two at Peking and four at Tientsin. They were very proud of their medical arrangements, and boasted that all their instruments and appliances had been made in Japan. That might have been true, but all their arrangements had been copied from France, and though imitation is the sincerest form of flattery, there was a fly in the ointment in the fact that *les Japonais copieraient en toutes choses leurs allies d'un jour*.

In addition to the medical equipment of the force, the writer attributes the high sanitary condition of the French troops to one or two subsidiary causes which are well worth mentioning.

1. To a general order issued by General Voy-

ron to the effect that "the Sanitary Service must have precedence of everything else, and all other branches of the service are to do their utmost to facilitate the work of the Sanitary Corps." "General Voyron," says the writer, "knew that the French soldier in health is ready for anything; assure him the integrity of his health, and everything else will come in due course of time."

2. A second contributory cause was the rapidity with which the sick and wounded were removed from the isolated stations and field ambulance hospitals to the more perfectly equipped stationary hospitals.

3. To the great care taken in recruiting to see that only suitable men were selected for the expedition, and to the vigilance of the permanent sanitary commission which was continually eliminating from the force all those who showed the slightest sign of inability to withstand the fatigues and hardships of the campaign.—*Yokohama Herald Mail Summary*, Oct. 17th.

#### VITAL STATISTICS.

Statistician Coffey of the San Francisco Board of Health made the following report for the month of November:

The total number of deaths during November was 579, equal to a death rate of 19.29 on each 1000 per annum, as against 564 for November, 1901, when the rate was 18.79. Births recorded last month numbered 500, equal to a rate of 16.65, as against 510 in November, 1901.

The deaths registered were distributed as follows: By sex, 352 males, 227 females; by race, 552 Caucasians, 24 Mongolians, 1 Japanese, 2 Africans; by nativities, Pacific Coast 208, other States 108, foreign 254, unascertained 8; 275 were single, 189 married, 90 widowed, 12 divorces, 13 unascertained; 79 were under 1 year of age, 26 were between 1 and 5 years, 46 from 5 to 20 years, 204 from 20 to 50 years, and 224 were 50 and past; 50 died in the City and County Hospital, 14 in the Almshouse, 18 in the emergency hospitals, homes and sanitariums, leaving 358 deaths to be distributed throughout the various sanitary districts in the city. The principal causes of death were: Diphtheria 14, scarlet fever 1, typhoid fever 14, septic diseases 7, cancer (all varieties) 35, pulmonary tuberculosis 69, other forms 8, senility (old age) 10, alcoholism 8, cirrhosis of liver 18, cerebral apoplexy 21, diseases of brain 17, of heart 69, of respiratory system (including pneumonia) 57, digestive system 39, Bright's disease 25. Accidental deaths: Asphyxia by gas 10, by falls, etc., 10, by street cars 6, by vehicles 4, other causes 20, total 50; homicides 3, suicide by firearms 1, hanging 1, gas 1, carbolic acid 9, chloroform 1, prussic acid 1, total 14.

The British Columbian Medical Society has abandoned the intention to appeal to the full court in a suit it instituted some months ago against an optical specialist. The society charged that the provisions of the Medical Act were being infringed by the optician in employing the title "Dr." without having received the Medical Society's license to practice.

Portland is to have its Health Department reorganized under a proposed new charter. The board is to consist of three regularly appointed physicians, who must have resided and practiced in the city for at least five years prior to their appointment. The appointing power rests with the Mayor.